

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 319 OF 595

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
Friends of Schumer

**A.** Full Name (Last, First, Middle Initial)  
Dennis P. Whalen

Mailing Address 42 Father's Way  
P.O. Box 888

City Slingerlands State NY Zip Code 12159

FEC ID number of contributing federal political committee.

Name of Employer Healthcare Association New York State Occupation Executive Vice President

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY  
10 / 28 / 2015

Transaction ID : C10492279

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
Erin Torre

Mailing Address 17 Westview Drive

City Huntington State NY Zip Code 11743

FEC ID number of contributing federal political committee.

Name of Employer N/A Occupation Homemaker

Receipt For: 2016  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY  
10 / 13 / 2015

Transaction ID : C10482949

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
Paul Libin

Mailing Address 160 West 66th Street  
Apartment 47A

City New York State NY Zip Code 10023

FEC ID number of contributing federal political committee.

Name of Employer Jujamcyn Theaters Occupation Executive Vice President

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY  
12 / 30 / 2015

Transaction ID : C10519409

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

20160203020004640